

Proj. ACME

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Your article "IBM System Dying of Financial Anemia at Medical Center"

There is much merit in what you say.

But your "humors" are not quite right. I wanted very much to unify with the campus systems. However, they persevered with modest (max. attainable?) goals and resisted the idea of moving toward real time applications. Finally, NIH, at that time insisted on a well-defined physical exhibition of their support for medical research and several medical investigators (all of whom have left SUMS!) balked at the idea of cooperating with the campus center having developed rather unhappy personal relationships in previous years.

You ought to read our original application to NIH, regarding goals, parts 2-3.

Why IBM? In fact, the main motive, possibly misguided, was the eventual integration of ACME into a larger university system. I thought Campus would take our conversational computing, and something like what we called SUMEX-1 would do more advanced real time work for the medical school. But IBM also seemed relatively cost-effective. I knew nothing of the \$1M grant -- are you sure you have that right -- the educational discount was, of course, crucial. And the pre-file was a lure!

It looks now as if a more austere "ACME" may still survive, as part of the new plans for the 65 system in SUMS. Obviously it cannot be economically viable, without subsidy, at its previous level of staff which was justified for a development effect.

Will you write about this in a further article?